MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/586503

FILING DATE 06 JUN 2008

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ˢᵗ AMENDMENT		AFTER 2ⁿᵈ AMENDMENT				AS FILED		AFTER 1ˢᵗ AMENDMENT		AFTER 2ⁿᵈ AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/					51						
2		/		/				52						
3		2		/				53						
4		0		/				54						
5		0		/				55						
6		0		/				56						
7		0		/				57						
8	/		/					58						
9		/		/				59						
10		2		/				60						
11		0		/				61						
12		0		/				62						
13		0		/				63						
14		0		/				64						
15	/		/					65						
16		/		/				66						
17		2		/				67						
18		0		/				68						
19		0		/				69						
20	/		/					70						
21	/		/					71						
22		2		/				72						
23		0		0				73						
24		0						74						
25								75						
26								76						
27								77						
28								78						
29								79						
30								80						
31								81						
32								82						
33								83						
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35								85						
36								86						
37								87						
38								88						
39								89						
40								90						
41								91						
42								92						
43								93						
44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	5		5					TOTAL IND.						
TOTAL DEP.	24		19					TOTAL DEP.						
TOTAL CLAIMS	29		24					TOTAL CLAIMS						